



Property and Location Authorization

USE FOR COMMISSIONED PROPERTY, REAL-ESTATE, RENTAL, BUSINESS, OR PRIVATE-LOCATION PHOTOGRAPHY

This form documents permission to enter and photograph the location. Fields marked * and all REQUIRED acknowledgments must be completed. Items marked OPTIONAL may be left blank. This does not replace permission required for identifiable people.

PROPERTY AND AUTHORIZED PERSON

REQUIRED

PROPERTY NAME AND FULL ADDRESS *

PROPERTY OWNER / CONTROLLING ENTITY *

CLIENT / SESSION REFERENCE *

AUTHORIZED SIGNER FULL NAME *

SIGNER'S ROLE OR TITLE *

SIGNER EMAIL *

SIGNER PHONE *

SESSION DATE *

OCCUPIED OR VACANT *

ACCESS AND INTENDED USE

REQUIRED

APPROVED AREAS, ROOMS, EXTERIOR AREAS, AND ACCESS TIMES *

EXCLUDED OR RESTRICTED AREAS (OPTIONAL)

INTENDED USE: LISTING, RENTAL, WEBSITE, PORTFOLIO, ADVERTISING, OR OTHER *



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MAY THE STREET ADDRESS BE DISPLAYED? *

MAY PROPERTY NAME / BUSINESS NAME APPEAR? *

ARTWORK, TRADEMARKS, SECURITY FEATURES, VALUABLES, PEOPLE, PETS, OR PRIVATE DETAILS TO EXCLUDE (OPTIONAL)

AUTHORIZATIONS AND RESPONSIBILITIES

REQUIRED

- ☐ I own or control the property, or I have actual authority from the owner or controlling entity to grant the access and photography described here.
- ☐ I authorize Anonymous Photography to enter the approved areas and create photographs for the intended use identified above.
- ☐ I will disclose and obtain required venue, building, association, broker, tenant, permit, artwork, trademark, drone, and participant permissions before photography begins.
- ☐ I am responsible for preparing the location, securing valuables and private information, controlling animals, and identifying hazards or restricted areas.
- ☐ I understand that this authorization covers the location only and does not authorize promotional use of an identifiable person's likeness.

SPECIAL CONDITIONS OR ADDITIONAL AUTHORIZED CONTACT (OPTIONAL)

ACKNOWLEDGMENT AND SIGNATURE

REQUIRED

Typing a name into the electronic version is intended as an electronic signature. A printed copy may instead be signed by hand. The signer confirms that the information provided is accurate and that the signer has authority to give the permissions selected in this form.

SIGNER'S FULL LEGAL NAME *

DATE SIGNED *

ELECTRONIC OR HANDWRITTEN SIGNATURE *

- ☐ I consent to use this form and signature as an electronic record and confirm that I can keep or print a copy.